

TENNESSEE GENERAL ASSEMBLY  
FISCAL REVIEW COMMITTEE



**FISCAL NOTE**

**SB 754 - HB 895**

March 30, 2017

**SUMMARY OF BILL:** Creates the *Sanctity of Human Life Act*. Declares that the life of each human being begins with fertilization, cloning, or its functional equivalent, irrespective of sex, health, function or disability, defect, stage of biological development, or condition of dependency, at which time every human being shall have all the legal and constitutional attributes and privileges of personhood.

Defines "cloning" as the process called somatic cell nuclear transfer, that combines an enucleated egg and the nucleus of a somatic cell to make a human embryo; "fertilization" as the process of a human spermatozoan penetrating the cell membrane of a human oocyte to create a human zygote, a one-celled human embryo, which is a new, unique human being; and "human" and "human being" to include each and every member of the species homo sapiens at all stages of life, beginning with the earliest stage of development, created by the process of fertilization, cloning, or its functional equivalent.

**ESTIMATED FISCAL IMPACT:**

**Increase State Expenditures - \$1,112,300**

**Increase Federal Expenditures - \$967,600**

Assumptions:

- Based on information provided by the Department of Children's Services, the proposed legislation would change the definition of child to include unborn babies who the DCS would serve.
- The DCS could file dependent and neglect (D&N) petitions in certain cases. The DCS reports that the average number of monthly referrals is 218 from hospitals on new born drug exposed infants.
- The proposed legislation would result in the DCS working prenatal cases which the DCS cannot accommodate within existing resources.
- The DCS will require 33 additional positions (27 case managers, 5 team leaders, and one team coordinator).
- The recurring increase in expenditures associated with the additional positions is estimated to be \$2,079,881 (\$1,163,300 salaries + \$421,581 benefits + \$495,000 administrative cost).

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- These expenditures will be funded through a combination of DCS state funds (38.0%), TennCare funds (45.0%), and Title IV-E federal funds (17.0%).
- The recurring increase in expenditures of \$2,079,881 will be compiled of \$1,112,274 state and \$967,607 federal as follows:
  - \$790,355 in DCS state funds ( $\$2,079,881 \times 38.0\%$ ).
  - \$321,919 in TennCare state funds [ $(\$2,079,881 \times 45.0\%) \times 34.395\%$ ]
  - \$614,027 in TennCare federal funds [ $(\$2,079,881 \times 45.0\%) \times 65.605\%$ ]
  - \$353,580 in Title IV-E federal funds ( $\$2,079,881 \times 17.0\%$ ).
- Based on information provided by the Department of Health, the proposed legislation will have a minimal impact on the daily operations of the Division of Policy, Planning, and Assessment.
- The Office of Vital Records could experience an increase in the number of vital records events that are registered; however, any cost can be accommodated within existing resources without an increased appropriation or reduced reversion.
- Based on information provided by the Bureau of TennCare, the proposed legislation does not impact any current abortion language around viability; therefore, any related fiscal impact is estimated to be not significant.
- Based on information provided by the Department of Human Services (DHS), the proposed legislation does not have an effect on program operations or federal funding; therefore, any fiscal impact to DHS is estimated to be not significant.

## **CERTIFICATION:**

The information contained herein is true and correct to the best of my knowledge.



Krista M. Lee, Executive Director

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